

We Must Check Your Application

You must send the information we need, or contact [name] by [date], or your children will stop receiving free or reduced-price meals.

School: _____ Date: _____

Dear _____:

We are checking your Free and Reduced-Price School Meals Application. Federal rules require that we do this to make sure only eligible children receive free or reduced-price meals. You must send us information to prove that [names of children] are eligible. If possible, send copies, not original papers. If you do send originals, they will be sent back to you only if you ask.

1. If you were receiving benefits from the Supplemental Nutrition Assistance Program (SNAP), or Temporary Assistance to Needy Families (TANF) or Food Distribution Program on Indian Reservations (FDPIR) when you applied for free or reduced-price meals, or at any time since then, send us a copy of one of these:

- SNAP, TANF or FDPIR Certification Notice that shows dates of certification.
- Letter from SNAP, TANF or FDPIR office that shows dates of certification.
- **Do not send your EBT card.**

2. If you get this letter for a homeless, migrant or runaway child, please contact [school, homeless liaison, or migrant coordinator] for help.

3. If the child is a Foster Child:

Provide written documentation that verifies the child is the legal responsibility of the agency or court or provide the name and contact information for a person at the agency or court who can verify that the child is a foster child.

4. If no one in your household receives SNAP, TANF or FDPIR benefits:

Send papers that show the amount of money your household receives from each source of income. The papers you must send show the **name** of the person who received the income, the **date** it was received, **how much** was received and **how often** it was received. **Send information to: [address].**

Acceptable papers include:

Jobs: Paycheck stub or pay envelope that shows the amount and how often pay is received; letter from employer stating gross wages and how often you are paid; or, if you work for yourself, business or farming papers, such as a ledger or tax books.

Social Security, Pensions, or Retirement: Social Security retirement benefit letter, statement of benefits received or pension award notice.

Unemployment, Disability, or Worker's Comp: Notice of eligibility from State employment security office, check stub, or letter from the Worker's Compensation office.

Welfare Payments: Benefit letter from the TANF office.

Child Support or Alimony: Court decree, agreement or copies of checks received.

Other income (such as rental income): Information that shows the amount of income received, how often it is received and the date received.

No Income: A brief note explaining how you provide food, clothing and housing for your household and when you expect an income.

Military Housing Privatization Initiative: Letter or rental contract showing that your housing is part of the Military Housing Privatization Initiative.

Timeframe of Acceptable Income Documentation: Please submit proof of one month's income; you could use the month prior to application, the month you applied or any month after that up to the time of verification.

If you have questions or need help, please call [name] at [phone number]. The call is free. [Toll free or reverse charge explanation]. You may also email us at [email address].

Sincerely,

[signature]

The Richard B. Russell National School Lunch Act requires the information requested in order to verify your children's eligibility for free or reduced price meals. If you do not provide the information or provide incomplete information, your children may no longer receive free or reduced price meals. Pursuant to Section 7 of the Privacy Act, disclosure of your Social Security number is not required. We do not need and are not requesting any Social Security numbers that may appear on documents you submit.

Non-Discrimination Statement: This explains what to do if you believe you have been treated unfairly.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotope, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- (1) Mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410
- (2) Fax: (202) 690-7442; or
- (3) Email: program.intake@usda.gov

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